



Holly S. Burgess (State Bar No. 104575)  
LAW OFFICES OF HOLLY S. BURGESS  
680 Auburn-Folsom Road, Suite 109  
Auburn, CA 95603  
(530) 889-8900-Telephone  
(530) 392-4641-Direct Dial  
(530) 889-8988-Facsimile  
[hollyburgess@lohsb.com](mailto:hollyburgess@lohsb.com)

Attorneys for Plaintiff/Debtor  
JAMES L. MACKLIN

**UNITED STATES BANKRUPTCY COURT**  
**EASTERN DISTRICT OF CALIFORNIA**

In re ) **CASE NO. 2010-44610**  
JAMES L. MACKLIN, )  
Debtor, )

JAMES L. MACKLIN, ) **ADV. NO. 11-02024-E**  
Plaintiff, ) **DCN: HSB-01**

-vs.- ) **CERTIFICATE OF SERVICE**

DEUTSCHE BANK NATIONAL TRUST CO., )  
AS INDENTURE TRUSTEE FOR THE )  
ACCREDITED MORTGAGE LOAN TRUST )  
2006-2 ASSET-BACKD NOTES; and all )  
persons claiming by, through, or under such )  
person, all persons unknown, claiming any legal )  
or equitable right, title, estate, lien, or interest in )  
the property described in the complaint adverse )  
to Debtor's title thereto; and )  
CORRESPONDENT DOES 1-10, Inclusive, )  
Defendant. )

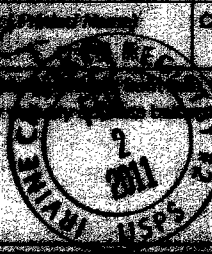
///

///

///

///

RETURN OF SERVICE		
Service of the Summons and complaint was made by me (1)	DATE	January 31, 2011
NAME OF SERVER (PRINT)	TITLE	Susanne Osborne Legal Secretary
Check one box below to indicate appropriate method of service		
<input type="checkbox"/> Served personally upon the defendant. Place where served: _____ <input type="checkbox"/> Left copies thereof at the defendant's dwelling house or usual place of abode with a person of suitable age and discretion then residing therein. <input type="checkbox"/> Name of person with whom the summons and complaint were left: _____ <input type="checkbox"/> Returned unexecuted: _____ <input checked="" type="checkbox"/> Other (specify): <u>mailed via USPS Certified Mail Return Receipt Requested, to David Boyer, Robert J. Jackson &amp; Associates, 4199 Campus Dr., Suite 700, Irvine, CA 92612-2698</u>		
STATEMENT OF SERVICE FEES		
TRAVEL <input checked="" type="checkbox"/>	SERVICES <input checked="" type="checkbox"/>	TOTAL <input checked="" type="checkbox"/>
DECLARATION OF SERVER		
<p>I declare under penalty of perjury under the laws of the United States of America that the foregoing information contained in the Return of Service and Statement of Service Fees is true and correct.</p> <p>Executed on <u>February 8, 2011</u> <span style="margin-left: 100px;"><u>Susanne Osborne</u> Signature of Server</span></p> <p style="margin-left: 400px;"><u>680 Auburn Folsom Rd.</u> Address of Server</p> <p style="margin-left: 400px;"><u>Suite 109</u></p> <p style="margin-left: 400px;"><u>Auburn, CA 95603</u></p>		

<p>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is checked.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the envelope or on the front if space permits.</p> <p>1. Article Addressed to:  <u>David Boyer</u>  <u>Robert J. Jackson &amp; Associates</u>  <u>4199 Campus Dr., Suite 700</u>  <u>Irvine, CA 92612-2698</u></p>	<p>A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Registered Mail <input type="checkbox"/> Restricted Delivery <input type="checkbox"/> Signature Required <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>C. Date of Delivery <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>2. Special Type <input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery (Circle Yes) <input type="checkbox"/> Yes</p>
	
2. Article Number (Transfer from service label)	7010 0290 0003 1622 8393